# Fax Memo



DATE:

December 17, 1999

TO:

Jeff Meserve

AIG

FROM:

Jennie Wu

Lockton Companies

RE:

IHS of Lester, Inc.

Umbrella Policy #: BE3574344

Renewal Effective: 01/01/00

- 2930

FAX TO: 617-4576874

Attached are the specs for the renewal.

Please forward renewal quote to my attention asap.

For your reference, we have attached our 05/28/99 fax outlining the corrections needed on the current policy.

Should you have any questions, please call.

NU-U/W 03027

### **LOCKTON COMPANIES**

Insurance and Risk Management Specialists 7910 34th Avenue, #5G / Jackson Heights, NY 11372 Phone: (718) 397-8988 / Fax: (718) 397-8987

# Umbrella Liability for IHS of Lester, Inc.

**Policy Term:** 

01/01/00 - 01

Policy Form:

Occurrence

Territory:

Worldwide Coverage

### **COVERAGE LIMITS**

**Each Occurrence Limit** 

2,000,000

**Aggregate Limit** 

Per location 2,000,000

**Policy Aggregate** 

2,000,000

**Deductibles or** 

25,000

**Self Insured Retention** 

Applies on a blanket basis over

Underlying insurance

Locations:

Listing of facilities attached

### Umbrella Liability for IHS of Lester, Inc.

### **COVERAGES. TERMS & CONDITIONS**

#### **Broad Named Insured:**

"The named insured includes any and all past, present or hereafter formed or acquired subsidiary companies, corporations, firms or organizations (excluding joint ventures) which are owned, financially controlled, under management control or for which you are obligated to provide insurance. This supersedes any reference in the policy to newly acquired organizations."

- 2. Provide Coverage for Joint Ventures.
- 3. Coverage provided to be on a "pay on behalf of" basis.
- Defense and Investigation coverage to be provided on a first dollar basis (not subject to S.I.R.).

#### Non-Concurrence Endorsement:

"Whereas, the underlying policy(ies) listed in the Schedule of Underlying Insurance including renewals or replacements thereof, are non-concurrent with the policy period hereunder, and Whereas, the Insured has no knowledge of accidents or occurrences having taken place during the period(s) of the underlying policy(ies) listed in the Schedule of Underlying Insurance to the inception of this excess policy; Now therefore, in consideration of the premium charged, in the event of reduction or exhaustion of the aggregate limit(s) of the underlying policy(ies) listed in the Schedule of Underlying Insurance by reason of losses in respect of occurrences or accidents prior to the inception of this excess policy, it is agreed that such insurance as is afforded by this policy shall, subject to the terms and conditions of the underlying insurance:

- 1. In the event of reduction, apply in excess of the reduced underlying limits.
- 2. In the event of exhaustion, continue in force as underlying insurance. Anything in this endorsement to the contrary notwithstanding, this policy applies only to occurrences happening during the policy period."
- 6. Provide coverage for Volunteers as Insureds.

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### Umbrella Liability for IHS of Lester, Inc.

Document 95-12

### 7. Clubs Endorsement:

"Insured" includes any association, club or other organization and your employees who are members thereof provided such entity is formed for or by your employees for social or recreational purposes with your knowledge and consent."

- 8. Include Employees as Insureds.
- Additional Insureds:

Follow form of primary General & ProfessionalLiability.

- Include automatic additional insured status for any person or entity to the extent required by contract.
- 11. Coverage territory to be worldwide.
- 12. Fellow Employee:

Delete any fellow employee exclusion as respects.

- 13. Delete any occupational disease exclusion.
- 14. Provide coverage for pollution arising from hostile fire, explosion, products, completed operations, sudden and accidental pollution occurring on insured's premises, sites or location including pollution arising out of mechanical breakdown or equipment failure.
- 15. Provide coverage for pollution arising from overturn collision or upset of a vehicle anywhere in the coverage territory.
- 16. Amend any care, custody, control exclusion to not apply to premises in insured's care, custody or control.
- 17. Amend blanket contractual coverage to include auto contractual.
- 18. Intentional injury:

Amend intentional injury to include property damage and delete the word "reasonable".

- Provide coverage for loss of use of property not physically impaired.
- Impaired Property:

Amend impaired property exclusion to provide coverage for property damage arising out of defective, deficient, inadequate or dangerous conditions in the insured's product.

- 21. Delete exclusion, if any, for personal injury contractual.
- Eliminate any requirement for reinstatement of underlying coverage. 22.

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### Umbrella Liability for IHS of Lester, Inc.

Document 95-12

- Provide coverage for non-owned watercraft.
- 24. Provide coverage for non-owned aircraft.
- Knowledge of Occurrence: 25.

"Knowledge of an occurrence by your agent, servant, or employee shall not constitute knowledge by you unless an executive officer, partner, proprietor or risk manager employee has received such notice."

26 Notice of Occurrence:

> "The company shall not deny coverage as the result of an unintentional failure by you to give notice as respects any occurrence, provided notice is given as soon as practicable after becoming aware that this policy may apply to such occurrence."

27. Notice of Cancellation or Material Change:

"In the event the policy is cancelled or materially changed at the request of the company,90 days notice will be provided to you, except in the event of non-payment of premium in which case notice will be 10 days."

Notice of Non-Renewal: 28.

> "In the event the policy is non-renewed at the request of the company, 90 days notice will be provided to the insured, except in the event of non-payment of premium in which case notice will be 10 days."

- 29. Unintentional Failure to Disclose:
  - "Your unintentional error or omission shall not be a basis for denial of any coverage afforded by this policy."
- 30. Provide a Waiver of Subrogation "If the insured has rights to recover all or part of any payment we have made under this Coverage part those rights are transferred to us. The insured must do nothing after loss to impair them. At our request the insured will bring suit or transfer those rights to us and help us enforce them."

#### 31. Broad Form Property Damage:

Delete any exclusion relating to property damage to the insured's products, completed operations, or work performed by others on the insured's behalf, or relating to property in the insured's care, custody or control and replace with the following:

"Coverage is not provided for the insured's liability for damage:

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### Umbrella Liability for IHS of Lester, Inc.

- To property owned or occupied by or rented to the insured, or except with respect to the use of elevators, to property held by the insured for sale or entrusted to the insured for storage or safekeeping;
- II. Except with respect to liability under a written sidetrack agreement or the use of elevators
  - A. to property while on premises owned by or rented to the insured for the purpose of having operations performed on such property by or on behalf of the insured,
  - B. to tools or equipment while being used by the insured in performing his operations,
  - C. to property in the custody of the insured which is to be installed, erected or used in construction by the insured,
  - to that particular part of any property, not on premises owned by or rented to the insured,
    - upon which operations are being performed by or on behalf of the insured at the time of the property damage arising out of such operations,
    - 2. out of which any property damage arises, or
    - 3. the restoration, repair or repla cement of which has been made or is necessary by reason of faulty workmanship

thereon by or on behalf of the insured

With respect to the completed operations hazard, to property damage to work performed by the named insured arising out of the work or any portion thereof, or out of materials part or equipment furnished in connection therewith."

#### 32. Language:

"The language of the policy and all endorsements shall be deemed to be that of the insurance company."

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Hanover 39 Hanover Circle Birmingham, AL 35205

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Mesa Manor 2901 North 12th Street Grand Junction, CO 81506-2897

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Pueblo 2611 Jones Avenue
Pueblo, CO 81004-2650

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Bradenton 2302 59th Street West Bradenton, FL 34209-7009

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Palm Bay 1515 Port Malabar Blvd. NE Palm Bay, FL 32905-5455

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Sebring 3011 Kenilworth Blvd. Sebring, FL 33870-4310

Integrated Health Services of Atlanta at Buckhead 54 Peachtree Park Drive Atlanta, GA 30309-1318

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Great Bend 1560 K-96 Highway Great Bend, KS 67530

Integrated Health Services of Lester, Inc. dba Integrated Health Services at Mayfair Manor 3300 Tales Creek Road, Lexington, KY 40502-3408

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Alexandria 5115 MacArthur Drive Alexandria, LA 71302-2999 Integrated Health Services of Lester, Inc. dba Integrated Health Services at Cheyenne Mounta 835 Tenderfoot Hill Road Colorado Springs, CO 80906-3999

Integrated Health Services of Lester, Inc. dba Integrated Health Services at Pikes Peak 2719 N. Union Blvd. Colorado Springs, CO 80909-1145

Integrated Health Services of Lester, Inc. dba Integrated Health Services Fort Myers 13755 Golf Club Pkwy
Ft. Myers, FL 33919-5146

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Orange Park 2029 Professional Center Drive Orange Park, FL 32073-4461

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Port Charlotte 4033 Beaver Lanc Port Charlotte, FL 33952-9277

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Winter Park 2970 Scarlet Road Winter Park, FL 32792-4399

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Atlanta at Shoreh 811 Kennesaw Avenue
Marietta, GA 30060-1092

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Wichita 5005 East 21st North Wichita, KS 67208

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Shreveport 225 Wyandotte Shreveport, LA 71101-4998

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Lafayette 325 Bacque Cresent Drive Lafayette, LA 70501

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Kaplan 1300 West 8th Street Kaplan, LA 70548-2996

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Many Hwy 6 East PO Box 360 Many, LA 71449-0360

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Marrero 5301 August Lane
Marrero, LA 70072-3699

Integrated Health Services of Lester, Inc. dba Integrated Health Services at Heritage North 1803 Jane St.
PO Box 9459
New Iberia 70562-9459
Integrated Health Services of Lester, Inc.

Integrated Health Services of Lester, Inc. dba Integrated Health Services at Claiborne 1536 Claiborne Shreveport, LA 71103-4297

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Vivian 912 S. Pecan Street Vivian, LA 71082-3313

Integrated Health Services of Lester, Inc.
dba Integrated Health Services of
Charlotte at Hawthorne
333 Hawthorne Lane
Charlotte, NC 28204
Integrated Health Services of Lester, Inc.
dba Integrated Health Services of Plainview
2510 West 24th
Plainview, TX 79072-1884

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Wichita Falls 601 Midwestern Parkway Wichita Falls, TX 76302-2499

Integrated Health Services of Lester, Inc.
dba Integrated Health Services of
Texas at Terrell Care
204 West Nash
Terrell, TX 75160-2607
NU-U/W 03034

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Lafayette 325 Bacque Cresent Drive Lafayette, LA 70501-2842

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Many South 255 Middle Creek Road PO Box 360 Many, LA 71449-0360 Integrated Health Services of Lester, Inc. dba Integrated Health Services of Minden 400 Meadowview Drive Minden, LA 71055-3522

Integrated Health Services of Lester, Inc. dba Integrated Health Services at Heritage South PO Box 9984
New Iberia, LA 70562-9984

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Thibodaux 1300 Lafourche Drive Thibodaux, LA 70301-2498

Integrated Health Services of Lester, Inc. dba Integrated Health Services at Pierremont 725 Mitchell Lane Shreveport LA 71106-2100

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Nashville 2733 McCampbell Nashville, TN 37214

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Iowa Park 1109 North 3rd Street Iowa Park, TX 76367-1299

Integrated Health Services of Lester, Inc. dba Integrated Health Services of Terrell 1800 North Frances
Terrell, T X 75160-1217

Integrated Health Services of Lester, Inc. dba Integrated Health Services of West Virginia
One Jeffersonian Manor
Charles Town, WV 25414

## Underlying policies for Policy # BE3574344 (Lester Umbrella)

1) Type of Coverage: General / Professional Liability

Insurer: Reliance National Policy #: NGB0151564-00 Policy Period: 01/01/99-0

Aggregate Reinstatement applies to limits

Professional Liability

Each Medical Incident per location: 2,000,000

Annual Aggregate: 4,500,000

General Liability

Aggregate per location: 2,500,000

Products and Completed Operations Limit. 2,500,000 Personal Injury and Advertising Injury Limit. 1,000,000

Each Occurrence: 1,000,000 Fire Damage: 100,000

Employee Benefits Limit (Claims Made)

Limit: 1,000,000 Aggregate: 2,500,000

2) Type of Coverage: Automobile Liability (Texas)

Insurer: Reliance National Policy #- NKA0134096-02 Policy Period: 01/01/99-00

Combined Single Limit: 1,000,000

3) Type of Coverage: Automobile Liability (All States except Texas)

Insurer: Reliance National Policy #: NKA013479-02 Policy Period: 01/01/99-00

Combined Single Limit: 1,000,000

4) Type of Coverage: Workers Compensation and Employers Liability

Insurer: Travelers

Print Date: 05/28/99

Policy #: UC2J-UB-100D0667-TJL-99

Policy Period: 01/01/99-00

Bodily Injury Limit per accident: 1,000,000 Bodily Injury Limit per disease: 1,000,000

Bodily Injury Limit per disease each employee: 1,000,000

#### BE3574344 Cont

5) Type of Coverage: Workers Compensation and Employers Liability

Insurer: Travelers

Policy #: UDRI-UB-100D0735-TIL-99

Policy Period: 01/01/99-00

Bodily Injury Limit per accident: 1,000,000 Bodily Injury Limit per disease: 1,000,000

Bodily Injury Limit per disease each employee: 1,000,000

6) Type of Coverage Excess Workers Compensation

Insurer: Travelers

Policy #: UWXJ-UB100DD0759-TIL-99

Policy Period: 01/01/99-00

Limit: 1,000,000

7) Type of Coverage Texas Occupational Accident & Health

Insurer: United National Insurance Company

Policy #: POA0050504 Policy Period: 01/01/99-00

Limit: 1,000,000

8) Type of Coverage Texas Excess Employers Liability

Insurer: United National Insurance Company

Policy #: PEL0003059 Policy Period: 01/01/99-00

Limit: 1,000,000

NU-U/W 03036

Print Date: 05/28/99